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tions of all serum and suspension samples were determined by high pressure liquid chromatography.

A chocolate-cherry 15 mg/mL metronidazole suspension was judged most palatable. It remained sterile during the 16 week period examined and exhibited a time to 10% decomposition of 13.4 years. Practical considerations dictate that this product be assigned a shelf-life of six weeks. The relative bioavailability of the suspension was 97.73%.

In conclusion, a chocolate-cherry 15 mg/mL metronidazole suspension is an acceptable product which exhibits reasonable stability and excellent bioavailability.

The Use of NSAIDs in a Family Medicine Out-patient Clinic, Li, D., B.Sc.Phm., Pharmacy Department,

Ottawa Civic Hospital, Ontario. Media awareness of the NSAID related side effects prompted this randomized, retrospective study of 446 patients to investigate the side effect profile of NSAIDs used in an out-patient family medicine clinic.

Side effects occurred in 9.4% of the population. Current literature dealing with antiinflammatory doses of the NSAIDs has revealed a side effect frequency of 10%. Females were more prone than males to developing major side effects, yet both sexes between 40–79 were identified as the group

at risk of developing adverse effects. Side effects were also associated with the prolonged use of high antiinflammatory doses of the drug. (As reported in the literature, the gastrointestinal system is the major source of complaints.)

Due to limited numbers of patients prescribed non-rheumatologic doses, the frequency of side effects in this population (1.8%) is questionable for extrapolation.

Results of this study led to recommendations of the cautious use of the NSAIDs in women greater than 40 years of age. Physicians within the institution have now started to prescribe NSAIDs more judiciously for the population at risk.